



FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)**890.00**

Complete if Known

Application Number 09/246,468
Filing Date February 9, 1998
First Named Inventor Rebek
Examiner Name M. Garcia
Group Art Unit 1627
Attorney Docket No. TSRI 659.0

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TECH CENTER 1600/2900

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 19-0962
Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|------------------------|----------|
| 101 710 | 201 355 | Utility filing fee | |
| 106 320 | 206 160 | Design filing fee | |
| 107 490 | 207 245 | Plant filing fee | |
| 108 710 | 208 355 | Reissue filing fee | |
| 114 150 | 214 75 | Provisional filing fee | |

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims - 20** = X =
Independent Claims - 3** = X =
Multiple Dependent =

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|--|----------|
| 103 18 | 203 9 | Claims in excess of 20 | |
| 102 80 | 202 40 | Independent claims in excess of 3 | |
| 104 270 | 204 135 | Multiple dependent claim, if not paid | |
| 109 80 | 209 40 | ** Reissue independent claims over original patent | |
| 110 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent | |

SUBTOTAL (2) (\$)

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|--|----------|
| 105 130 | 205 65 | Surcharge - late filing fee or oath | |
| 127 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 130 | 139 130 | Non-English specification | |
| 147 2,520 | 147 2,520 | For filing a request for ex parte reexamination | |
| 112 920* | 112 920* | Requesting publication of SIR prior to Examiner action | |
| 113 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action | |
| 115 110 | 215 55 | Extension for reply within first month | |
| 116 390 | 216 195 | Extension for reply within second month | |
| 117 890 | 217 445 | Extension for reply within third month | 890.00 |
| 118 1,390 | 218 695 | Extension for reply within fourth month | |
| 128 1,890 | 228 945 | Extension for reply within fifth month | |
| 119 310 | 219 155 | Notice of Appeal | |
| 120 310 | 220 155 | Filing a brief in support of an appeal | |
| 121 270 | 221 135 | Request for oral hearing | |
| 138 1,510 | 138 1,510 | Petition to institute a public use proceeding | |
| 140 110 | 240 55 | Petition to revive - unavoidable | |
| 141 1,240 | 241 620 | Petition to revive - unintentional | |
| 142 1,240 | 242 620 | Utility issue fee (or reissue) | |
| 143 440 | 243 220 | Design issue fee | |
| 144 600 | 244 300 | Plant issue fee | |
| 122 130 | 122 130 | Petitions to the Commissioner | |
| 123 50 | 123 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 180 | 126 180 | Submission of Information Disclosure Stmt | |
| 581 40 | 581 40 | Recording each patent assignment per property (times number of properties) | |
| 146 710 | 246 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 710 | 249 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 710 | 279 355 | Request for Continued Examination (RCE) | |
| 169 900 | 169 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**890.00**

SUBMITTED BY

Name (Print/Type) Thomas E. Northrup
Signature *Thomas E. Northrup*

Registration No. (Attorney/Agent) 33,268

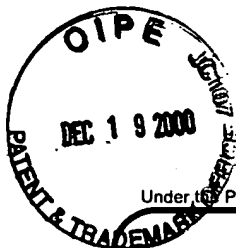
Complete (if applicable)

Telephone (858) 784-2937

Date December 13, 2000

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PTO/SB/21 (08-00)
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| | | |
|--|------------------------|------------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 09/246,468 |
| | Filing Date | February 9, 1999 |
| | First Named Inventor | Rebek |
| | Group Art Unit | 1627 |
| | Examiner Name | M. Garcia |
| Total Number of Pages in This Submission | Attorney Docket Number | TSRI 659.0 |

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| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | - Postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---------------------------|
| Firm or Individual name | Thomas E. Northrup |
| Signature | <i>Thomas E. Northrup</i> |
| Date | December 13, 2000 |

| CERTIFICATE OF MAILING | |
|---|---------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 12/13/00 | |
| Typed or printed name | Nancy Barker |
| Signature | <i>Nancy Barker</i> |
| Date | December 13, 2000 |

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